## **WORKSCOPE AUTHORIZATION - Odb 401.27**



Use this form (s) to obtain pre-approval from NHDES for performing corrective action at sites eligible for the Petroleum Reimbursement Funds under RSA 146-D, E or F. Contact NHDES for guidance on use of this form and the need for additional documentation to describe the proposed work. NOTE: You must receive NHDES approval even if private insurance is initially funding the work.

**REIMBURSEMENT CANNOT BE AUTHORIZED	IF A COMPLE	TE ESTIMA	ATE IS NOT	PRE-APPR	OVED BY DES**
Facility Name:  Location Address:  Location Town:  Facility Owner:			NHDES No.: UST/AST Fac. ID#: Project Type: Phase Code (1):		
Dates of Work:			•	Consultant:	
			•	Contractor:	
Task Summary:				•	
•					
Description	Unit Basis (2)	Rate (2)	# Units		Estimated Cost
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				Task total:	
Task Summary:				•	
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Description	Unit Basis (2)	Rate (2)	# Units		Estimated Cost
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Task Summary:					
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page 1 of 2	·			Task total:	

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Task Summary:					
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Description	Unit Basis (2)	Rate (2)	# Units	Y/N	Estimated Cost
	Each	1 19110 (=/		.,	
	Each				ļ
				Task total	
			Tota	I All Services	
					(1) Phase Codes:
					IRA - Initial Response Action
Owner's Representative:					FPR - Free Product Removal ISC - Initial Site Characterization
Owner 3 Representative.	(signature/date	)		i	SIR - Site Investigation
	(4.9	,			RAP - Remedial Action Plan
NHDES Approval:					RPI - Remedial Plan Implementation
	(signature/date	)		•	GMP - GW Monitoring/Permits
(2) Refer to Section VI of the Guidance Manual for information	on on applicable	unit-based c	osts and rate	S.	
A report documenting the approved work must be provided	to NHDES by				
7. Toport accumenting the approved work must be provided	to Hildeo by				

Please be advised that for homeowner requests for reimbursement of oil discharge cleanup costs submitted after April 4, 2001, a presumption will be applied that the costs for investigation and remediation of groundwater and surface water contamination are covered up to the limits of the homeowner's policy. To overcome this presumption, a written certification from the insurer that coverage does not extend to these costs under the terms of the policy and the reasons therefor must be submitted with the claim.